



# COVID-19

## COVID-19 Information for Families with Children/ Youth with Special Healthcare Needs

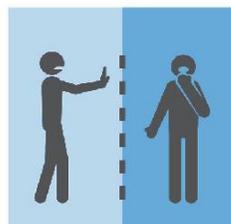
\*Symptoms associated with COVID-19 (fever, cough, shortness of breath) can range from minor to severe, and while it appears children are less likely to become seriously ill, anyone with immune deficiency or suppression or a chronic illness – such as asthma, emphysema, heart disease, lung disease, or other conditions – may be at higher risk.

\*There does not appear to be evidence indicating that children with medical complexity (CMC) develop more serious symptoms; however, it is recommended that anyone who has a serious long-term health problem take extra steps to reduce the risk of getting sick with the virus.

\*These actions include distancing from others, also known as social distancing, going out only when absolutely necessary, as well as following measures shown in pictures below.



STAY HOME  
WHEN YOU ARE  
SICK



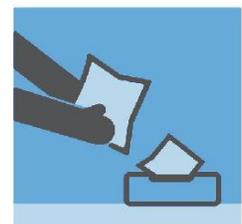
AVOID CONTACT  
WITH PEOPLE  
WHO ARE SICK



GET ADEQUATE SLEEP  
AND EAT WELL-  
BALANCED  
MEALS



WASH HANDS OFTEN  
WITH WATER AND SOAP  
(20 SECONDS  
OR LONGER)



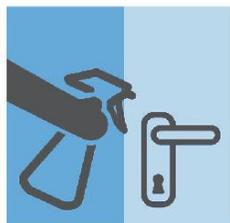
DRY HANDS WITH  
A CLEAN TOWEL  
OR AIR DRY  
YOUR HANDS



COVER YOUR MOUTH  
WITH A TISSUE OR  
SLEEVE WHEN  
COUGHING OR SNEEZING



AVOID TOUCHING  
YOUR EYES, NOSE,  
OR MOUTH WITH  
UNWASHED HANDS  
OR AFTER  
TOUCHING SURFACES



CLEAN AND DISINFECT  
"HIGH-TOUCH"  
SURFACES OFTEN



CALL BEFORE VISITING  
YOUR DOCTOR



PRACTICE GOOD  
HYGIENE HABITS



# COVID-19

## What should Alaskans do to prevent the spread of respiratory infections?

- Keep at least 6 feet away from ill people who are coughing or sneezing.
- Wash your hands frequently with soap and water for 20 seconds. If you don't have soap and water, use alcohol-based hand sanitizer that is at least 60% alcohol.
- Try to avoid touching your face, mouth, nose, and eyes.
- Routinely clean frequently touched objects and surfaces, including toys, doorknobs, keyboards, and phones.
- If you begin to feel ill, stay home! Stay home for at least 24 hours after you no longer have a fever without the use of fever-reducing medicines.
- Cover your coughs and sneezes with a tissue and throw away the tissue after use. If you don't have a tissue, cough and sneeze into the inside of your elbow.
- If you think you have COVID-19, call ahead and make an appointment before seeing a clinician. This will help the health care provider's office take steps to keep other people from getting infected or exposed. When you call, make sure you tell the provider if you think you may have been exposed to the virus that causes COVID-19, either through travel or with a case of the disease.

information [http: http://dhss.alaska.gov/dph/Epi/id/SiteAssets/Pages/HumanCoV/COVID-19\\_Whatthepubliccando.pdf](http://dhss.alaska.gov/dph/Epi/id/SiteAssets/Pages/HumanCoV/COVID-19_Whatthepubliccando.pdf)

*Any testing for COVID-19 requires a doctor's order. Do not go to the emergency department or urgent care to obtain a test. If you believe your child needs to be evaluated, call your pediatrician in advance to find out where you should go.*

**Disaster Distress Helpline at 1-800-985-5990 (1-800-846-8517 TTY)**

---

**Careline is Alaska's Suicide Prevention and Someone to Talk to Line**

**Phone: 1-877-266-4357 or visit <https://carelinealaska.com/>**

---

**For current information related to COVID-19**  
dial 2-1-1 or 1-800-478-2221 Available 7am - 8pm, 7 days a week  
<https://coronavirus-response-alaska-dhss.hub.arcgis.com/>  
<http://dhss.alaska.gov/dph/Epi/id/Pages/COVID-19/default.aspx>



# COVID-19

## **Checklist for Families with Children/ Youth With Special Health Care Needs**

- \*Have a good supply of medications, durable medical equipment (DME), special nutritionals, and other supplies, so you can stay home for an extended period, if needed.
- \*You may need to contact your physician for extra medication or change to a mail-order pharmacy to obtain more than a month's supply. Try to have a 90-day supply.
- \*For children with asthma, try to have extra inhalers and follow your asthma plan.
- \*Frequently clean and disinfect DME, assistive technology and adaptive equipment.
- \*Understand that protective equipment - gloves, water repellent gowns, face shields -may be necessary for home care workers, especially for children with secretions. Please limit use when possible due to concerns over severe shortages.
- \*Ask home nurses and other healthcare workers to stay away if they have any respiratory symptoms. Plan for absences and changes in schedule.
- \*Keep family emergency preparedness kits well stocked with food, water, household supplies, and other items. If you have a go-bag, such as an emergency kit for a tracheostomy or gastronomy tube (G-tube), make sure it includes back up supplies.
- \*Arranging alternative strategies for home visitors, such as video chats or phone calls.
- \*Develop a plan for emergency caregivers in case family members or guardians become ill.
- \*Try to assure children are cared for by people they know so there are minimal separations from familiar caregivers.
- \*If service animals are in the house, make sure children and animals stay together.
- \*Complete a Medical and Emergency Care Plan detailing your child's medical needs, list of medical provider with phone numbers, and family or friends who can help in an emergency.



# Medical Summary and Emergency Care Plan

This document should be shared with and carried by youth and families/caregivers.

Date Completed:		Date Revised:	
Form completed by:			
<b>Contact Information</b>			
Name:		Nickname:	
DOB:		Preferred Language:	
Parent (Caregiver):		Relationship:	
Address:			
Cell #:	Home #:	Best Time to Reach:	
E-Mail:		Best Way to Reach: Text Phone Email	
Health Insurance/Plan:		Group and ID #:	
<b>Emergency Care Plan</b>			
Emergency Contact:		Relationship:	Phone:
Preferred Emergency Care Location:			
Common Emergent Presenting Problems	Suggested Tests	Treatment Considerations	
Special Concerns for Disaster:			
<b>Allergies and Procedures to be Avoided</b>			
Allergies	Reactions		
To be avoided	Why?		
<input type="checkbox"/> Medical Procedures:			
<input type="checkbox"/> Medications:			
<b>Diagnoses and Current Problems</b>			
Problem	Details and Recommendations		
<input type="checkbox"/> Primary Diagnosis			
<input type="checkbox"/> Secondary Diagnosis			
<input type="checkbox"/> Behavioral			
<input type="checkbox"/> Communication			
<input type="checkbox"/> Feed & Swallowing			
<input type="checkbox"/> Hearing/Vision			
<input type="checkbox"/> Learning			
<input type="checkbox"/> Orthopedic/Musculoskeletal			
<input type="checkbox"/> Physical Anomalies			
<input type="checkbox"/> Respiratory			
<input type="checkbox"/> Sensory			
<input type="checkbox"/> Stamina/Fatigue			
<input type="checkbox"/> Other			





# Sample Medical Summary and Emergency Care Plan

## Six Core Elements of Health Care Transition 2.0

School and Community Information			
Agency/School		Contact Information	
		Contact Person:	Phone:
		Contact Person:	Phone:
		Contact Person:	Phone:
Special information that the youth or family wants health care professionals to know			
<hr/>			
Youth signature	Print Name	Phone Number	Date
<hr/>			
Parent/Caregiver	Print Name	Phone Number	Date
<hr/>			
Primary Care Provider Signature	Print Name	Phone Number	Date
<hr/>			
Care Coordinator Signature	Print Name	Phone Number	Date

Please attach the immunization record to this form.